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| B1 (Official Form 1)(12/11) | | | | | | | | | | | |
|---|---|------------------------|--|---|--------------------------------------|--------------------------------|---|--|--|----------------|---------------------------------|
| | United S West | | | ruptcy Michig | | | | | Vol | luntary | Petition |
| Name of Debtor (if individual, enter Last, First, Middle): Kutschinski, Catherine Louise | | | | Name | of Joint De | ebtor (Spouse | e) (Last, First | , Middle): | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | used by the J maiden, and | | | 8 years | | |
| Last four digits of Soc. Sec. or (if more than one, state all) xxx-xx-5191 Street Address of Debtor (No. | | | ΓΙΝ) No./C | Complete E | | than one, state | f Soc. Sec. or all) | | | | No./Complete EIN |
| 1821 Philadelphia Aver Grand Rapids, MI | • | na state). | | ZIP Code | | riddress of | Tome Bestor | (110. und Su | cot, city, t | ina state). | ZIP Code |
| G CD 11 | D: : 1 DI (| · D · | 4 | 19507-28 | | CD :1 | C (1 | D ' ' 1 DI | CD. | | |
| County of Residence or of the Kent | Principal Place of | Business: | | | Count | y of Reside | ence or of the | Principal Pla | ice of Busi | ness: | |
| Mailing Address of Debtor (if | different from stre | et address) |): | | Mailin | g Address | of Joint Debt | or (if differe | nt from stro | eet address) |): |
| | | | | | | | | | | | |
| | | | _ | ZIP Code | | | | | | | ZIP Code |
| Location of Principal Assets o (if different from street addres | | | | | | | | | | | |
| Type of Debt | | | | of Business | | | • | of Bankrup | | | ich |
| (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) (Check one box) □ Health Care Business □ Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank | | | defined | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt | er 7 er 9 er 11 er 12 | of □ Cl | hapter 15 P a Foreign hapter 15 P | Petition for l Main Proce | Recognition | | |
| Chapter 15 Del | otors | ☐ Other | | | | | | | e of Debts | | |
| Country of debtor's center of mai Each country in which a foreign by, regarding, or against debtor is | proceeding | Debtor under | Check box is a tax-ex Title 26 of t | mpt Entity , if applicable empt organize the United State Revenue Co | e) zation tates | defined "incurr | are primarily condinated in 11 U.S.C. § seed by an individual, family, or | onsumer debts, § 101(8) as idual primarily | for | _ | ts are primarily ness debts. |
| | ee (Check one box |) | | 1 | one box: | | • | ter 11 Debt | | | |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official | | | Debtor is not if: Debtor's aggi are less than S | a small busing regate nonco \$2,343,300 (| | defined in 11 U | J.S.C. § 1010 | (51D). | iders or affiliates) ree years thereafter). | | |
| Filing Fee waiver requested (a attach signed application for the | | | | st B. | Acceptances | ng filed with of the plan w | this petition. vere solicited pr S.C. § 1126(b). | | one or mor | e classes of c | reditors, |
| Statistical/Administrative In ☐ Debtor estimates that fund ☐ Debtor estimates that, after there will be no funds available. | s will be available r any exempt prope | erty is exclu | uded and | administrat | | es paid, | | THIS | SPACE IS | FOR COURT | Γ USE ONLY |
| Estimated Number of Creditor 1- 50- 100- 49 99 199 | 200- | 1,000- | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | |
| \$50,000 \$100,000 \$500, | 001 to \$500,001 S 000 to \$1 t | \$1,000,001 to \$10 | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |
| Estimated Liabilities | 001 to \$500,001 S 000 to \$1 | \$1,000,001 to \$10 | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |

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| B1 (Official Form 1)(12/11) | | Page 2 |
|---|--|---|
| Voluntary Petition | Name of Debtor(s): Kutschinski, Catherine | Louisa |
| (This page must be completed and filed in every case) | Ruischinski, Camenne | Louise |
| All Prior Bankruptcy Cases Filed Within Las | t 8 Years (If more than two, a | attach additional sheet) |
| Location Where Filed: - None - | Case Number: | Date Filed: |
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or | Affiliate of this Debtor (If m | nore than one, attach additional sheet) |
| Name of Debtor: - None - | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A | (To be completed if debtor is an | Exhibit B individual whose debts are primarily consumer debts.) |
| (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. | that I th | |
| | Martin L. Rogalski P | 2-30548 |
| Does the debtor own or have possession of any property that poses or is alleged to Yes, and Exhibit C is attached and made a part of this petition. No. Ext (To be completed by every individual debtor. If a joint petition is filed, ea Exhibit D completed and signed by the debtor is attached and made If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached as Information Regarding (Check any appropriate the property of the property | nibit D ach spouse must complete and a part of this petition. and made a part of this petition and the Debtor - Venue pplicable box) al place of business, or principal place of such 180 day eneral partner, or partnership points in the United States but is a che interests of the parties will es as a Tenant of Residential | attach a separate Exhibit D.) n. pal assets in this District for 180 s than in any other District. pending in this District. cipal assets in the United States in defendant in an action or be served in regard to the relief |
| | blicable boxes) | 2100010 |
| ☐ Landlord has a judgment against the debtor for possession | n of debtor's residence. (If box | checked, complete the following.) |
| (Name of landlord that obtained judgment) (Address of landlord) | | |
| □ Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment □ Debtor has included in this petition the deposit with the co | for possession, after the judgn | nent for possession was entered, and |
| after the filing of the petition. □ Debtor certifies that he/she has served the Landlord with t | · | |

B1 (Official Form 1)(12/11) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

x /s/ Catherine Louise Kutschinski

Signature of Debtor Catherine Louise Kutschinski

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 17, 2012

Date

Signature of Attorney*

X /s/ Martin L. Rogalski

Signature of Attorney for Debtor(s)

Martin L. Rogalski P-30548

Printed Name of Attorney for Debtor(s)

Martin L. Rogalski, P.C.

Firm Name

1881 Georgetown Center Drive Jenison, MI 49428

Address

Email: court@mrogalski.com

(616) 457-4410 Fax: (616) 457-6944

Telephone Number

May 17, 2012

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Kutschinski, Catherine Louise

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| ₹ | Г. | 7 | • | |
|---|----|---|---|--|
| | | | | |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Michigan

| | | • | | | |
|-------|------------------------------|-----------|----------|----|--|
| In re | Catherine Louise Kutschinski | | Case No. | | |
| | | Debtor(s) | Chapter | 13 | |
| | | | | | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|--|---|
| mental deficiency so as to be incapable of real financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 1 | 109(h)(4) as impaired by reason of mental illness or izing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being a credit counseling briefing in person, by telephone, or imbat zone. |
| ☐ 5. The United States trustee or bankruptcy a requirement of 11 U.S.C. § 109(h) does not apply in the | dministrator has determined that the credit counseling his district. |
| I certify under penalty of perjury that the in | nformation provided above is true and correct. |
| Signature of Bestor. | /s/ Catherine Louise Kutschinski Catherine Louise Kutschinski |
| Date: May 17, 2012 | |

Certificate Number: 01401-MIW-CC-017983316



CERTIFICATE OF COUNSELING

I CERTIFY that on April 23, 2012, at 4:14 o'clock PM EDT, Catherine L Kutschinski received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Western District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: April 23, 2012 By: /s/Candy Wright for Tara Blackburn

Name: Tara Blackburn

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Western District of Michigan

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|--------|----------|----|
| _ | | Debtor | | |
| | | | Chapter | 13 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 2 | 99,000.00 | | |
| B - Personal Property | Yes | 4 | 86,013.06 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 2 | | 139,318.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | 38,238.95 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 3,650.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 1,491.00 |
| Total Number of Sheets of ALL Schedules | | 21 | | | |
| | T | otal Assets | 185,013.06 | | |
| | | | Total Liabilities | 177,556.95 | |

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Western District of Michigan

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|--------|----------|----|
| _ | | Debtor | | |
| | | | Chapter | 13 |
| | | | _ | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 3,650.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 1,491.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 5,430.50 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 25,668.00 |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 38,238.95 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 63,906.95 |

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B6A (Official Form 6A) (12/07)

| In re | Catherine Louise Kutschinski | | Case No. |
|-------|------------------------------|--------|----------|
| - | | Debtor | |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|--|---|--|----------------------------|
| RESIDENCE LOCATED AT: | OWNER | - | 99,000.00 | 122,429.00 |

1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 (See Attachment 'A' for Legal Description) SEV: \$47,100 PP# 41-18-05-477-008

Sub-Total > 99,000.00 (Total of this page)

Total > 99,000.00

(Report also on Summary of Schedules)

IN RE: CATHERINE LOUISE KUTSCHINSKI

ATTACHMENT 'A'

Residence located at:

1821 Philadelphia Ave SE Grand Rapids, MI 49507

Legal description:

The following described premises situated in the township of Paris, County of Kent, and State of Michigan, to-wit:

LOT 55, BELVEDERE HEIGHTS IN GRAND RAPIDS CITY AND PARIS TOWNSHIP, KENT COUNTY, MICHIGAN, AS RECORDED IN LIBER 30 OF PLATS, PAGE 32.

PP# 41-18-05-477-008

B6B (Official Form 6B) (12/07)

| In re | Catherine Louise Kutschinski | Case No. | |
|-------|------------------------------|----------|--|
| - | | Debtor | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O N Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|----|--|---|---|--|
| 1. | Cash on hand | CASH | - | 80.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or | OPTION 1 CREDIT UNION SAVINGS ACCOUNT (XX9280-001) | - | 5.00 |
| | shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | OPTION 1 CREDIT UNION CHECKING ACCOUNT (XX9280-0011) (Negative balance) | - | 0.00 |
| | cooperation. | OPTION 1 CREDIT UNION SPARE CHANGE ACCOUNT (XX9280-0016) | - | 0.00 |
| | | LAKE MICHIGAN CREDIT UNION CHECKING ACCOUNT (Opened May 1, 2012) | - | 24.54 |
| | | LAKE MICHIGAN CREDIT UNION SAVINGS ACCOUNT (Opened May 1, 2012) | - | 5.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | USUAL HOUSEHOLD GOODS (NO ONE ITEM VALUGREATER THAN \$550.00) | JE - | 2,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | SPORTS MEMORABILIA: (2) CHAIRS FROM THE BOSTON GARDEN (\$1,000.00); (1) AUTOGRAPHED JERSEY (MARK GRACE) (\$50.00); (8) AUTOGRAPHED BASEBALLS (\$200.00) | - | 1,250.00 |
| | | ANTIQUE FURNITURE | - | 1,500.00 |
| 6. | Wearing apparel. | CLOTHING | - | 200.00 |
| 7. | Furs and jewelry. | MISCELLANEOUS JEWELRY | - | 400.00 |
| | | (Tota | Sub-Total of this page) | al > 5,964.54 |

³ continuation sheets attached to the Schedule of Personal Property

| In re | Catherine Louise Kutschinski | Case No. |
|-------|------------------------------|----------|
| | | |

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | N | (| Husband, | |
|-----|---|-------------|--|---------------------------------|---|
| | Type of Property | O N E | Description and Location of Property | Wife, Joint, or Community | Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 8. | Firearms and sports, photographic, and other hobby equipment. | | SHOTGUNS (3 @ \$50.00/EACH) | - | 150.00 |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | TERM LIFE INSURANCE THROUGH EMPLOYE | ER - | 1.00 |
| 10. | Annuities. Itemize and name each issuer. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | 403(b) SPECTRUM HEALTH RETIREMENT ACCOUNT (ING) | - | 56,247.52 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | Χ | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | Χ | | | |
| 16. | Accounts receivable. | | PROMISSORY NOTE FROM FRIEND | - | 7,000.00 |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | Х | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | Χ | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| | | | | Sub-To | • |
| | | | | (Total of this page |) |

Sheet __1__ of __3__ continuation sheets attached to the Schedule of Personal Property

| In re Catherine Louise Kutschinski Case No. | , |
|---|---|
|---|---|

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | C | CLAIM FOR RETRIBUTION FOR STOLEN JEWELRY | - | 2,000.00 |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | 2 | 2008 TOYOTA CAMRY (N.A.D.A. VALUE) | - | 14,650.00 |
| 26. | Boats, motors, and accessories. | Χ | | | |
| 27. | Aircraft and accessories. | Χ | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | Х | | | |
| 30. | Inventory. | Χ | | | |
| 31. | Animals. | Χ | | | |
| 32. | Crops - growing or harvested. Give particulars. | Х | | | |
| 33. | Farming equipment and implements. | X | | | |
| | | | (Total | Sub-Tota of this page) | al > 16,650.00 |

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Catherine Louise Kutschinski | Case No. | |
|-------|------------------------------|---|--|
| - | | Debtor ———————————————————————————————————— | |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 34. Farm supplies, chemicals, and feed. | Χ | | | |
| 35. Other personal property of any kind not already listed. Itemize. | Χ | | | |

| Sub-Total > 0.00 (Total of this page) | Total > 86,013.06

Sheet 3 of 3 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/10)

| In re | Catherine Louise Kutschinski | Case N | 0 |
|-------|------------------------------|--------|---|
| • | | Debtor | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | Check if debtor claims a homestead exemption that exceeds |
|---|--|
| (Check one box) | \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafted |
| 11 U.S.C. §522(b)(2) | with respect to cases commenced on or after the date of adjustment.) |
| □ 11 U.S.C. §522(b)(3) | |

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|---|----------------------------------|---|
| Real Property RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 (See Attachment 'A' for Legal Description) SEV: \$47,100 PP# 41-18-05-477-008 | 11 U.S.C. § 522(d)(1) | 10,000.00 | 99,000.00 |
| Cash on Hand CASH | 11 U.S.C. § 522(d)(5) | 80.00 | 80.00 |
| Checking, Savings, or Other Financial Accounts, Certi OPTION 1 CREDIT UNION SAVINGS ACCOUNT (XX9280-001) | ficates of Deposit 11 U.S.C. § 522(d)(5) | 5.00 | 5.00 |
| OPTION 1 CREDIT UNION CHECKING ACCOUNT (XX9280-0011) (Negative balance) | 11 U.S.C. § 522(d)(5) | 0.00 | 0.00 |
| OPTION 1 CREDIT UNION SPARE CHANGE ACCOUNT (XX9280-0016) | 11 U.S.C. § 522(d)(5) | 0.00 | 0.00 |
| LAKE MICHIGAN CREDIT UNION CHECKING ACCOUNT (Opened May 1, 2012) | 11 U.S.C. § 522(d)(5) | 24.54 | 24.54 |
| LAKE MICHIGAN CREDIT UNION SAVINGS ACCOUNT (Opened May 1, 2012) | 11 U.S.C. § 522(d)(5) | 5.00 | 5.00 |
| Household Goods and Furnishings USUAL HOUSEHOLD GOODS (NO ONE ITEM VALUE GREATER THAN \$550.00) | 11 U.S.C. § 522(d)(3) | 2,500.00 | 2,500.00 |
| Books, Pictures and Other Art Objects; Collectibles SPORTS MEMORABILIA: (2) CHAIRS FROM THE BOSTON GARDEN (\$1,000.00); (1) AUTOGRAPHED JERSEY (MARK GRACE) (\$50.00); (8) AUTOGRAPHED BASEBALLS (\$200.00) | 11 U.S.C. § 522(d)(5) | 1,250.00 | 1,250.00 |
| ANTIQUE FURNITURE | 11 U.S.C. § 522(d)(3) | 1,500.00 | 1,500.00 |
| Wearing Apparel CLOTHING | 11 U.S.C. § 522(d)(3) | 200.00 | 200.00 |
| Furs and Jewelry MISCELLANEOUS JEWELRY | 11 U.S.C. § 522(d)(4) | 400.00 | 400.00 |

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/10) -- Cont.

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|--------|----------|--|
| - | | Debtor | -, | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|---|----------------------------------|---|
| Firearms and Sports, Photographic and Other Hobby SHOTGUNS (3 @ \$50.00/EACH) | Equipment 11 U.S.C. § 522(d)(5) | 150.00 | 150.00 |
| Interests in Insurance Policies TERM LIFE INSURANCE THROUGH EMPLOYER | 11 U.S.C. § 522(d)(7) | 1.00 | 1.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension or F 403(b) SPECTRUM HEALTH RETIREMENT ACCOUNT (ING) | Profit Sharing Plans 11 U.S.C. § 522(d)(10)(E) and (d)(12) | 56,247.52 | 56,247.52 |
| Accounts Receivable PROMISSORY NOTE FROM FRIEND | 11 U.S.C. § 522(d)(5) | 7,000.00 | 7,000.00 |
| Other Contingent and Unliquidated Claims of Every Na CLAIM FOR RETRIBUTION FOR STOLEN JEWELRY | ature 11 U.S.C. § 522(d)(5) | 2,000.00 | 2,000.00 |

Total: 81,363.06 170,363.06 B6D (Official Form 6D) (12/07)

| In re | Catherine Louise Kutschinski | Case No | _ |
|-------|------------------------------|---------|---|
| | | Debtor | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTLNGENT | OZ L Q O L D A F E | S P U T E | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|-----------------|------------------------|---|--------------|--------------------|-----------------------|--|---------------------------------|
| Account No. xxxxxxxx7872 CHASE PO BOX 901039 FORT WORTH, TX 76101 | | - | 02/05/07 SECOND MORTGAGE RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 Value \$ 99,000.00 | | - E D | | 42,830.00 | 23,429.00 |
| Account No. XXXXXXXX7872 CHASE C/O GC SERVICES LP 6330 GULFTON HOUSTON, TX 77081 | | | Representing: CHASE Value \$ | | | | Notice Only | |
| Account No. xxxxxxx6901 REGIONAL FINANCE CORP 2676 E AURORA RD TWINSBURG, OH 44087 | | - | 09/01/11 VEHICLE 2008 TOYOTA CAMRY Value \$ 14,650.00 | | | | 16,889.00 | 2,239.00 |
| Account No. xxxxxxx6901 REGIONAL FINANCE CORP C/O REGIONAL ACCEPTANCE CORP PO BOX 830913 BIRMINGHAM, AL 35283 | | | Representing: REGIONAL FINANCE CORP Value \$ | | | | Notice Only | · |
| continuation sheets attached | | | S (Total of th | ubt nis j | | - 1 | 59,719.00 | 25,668.00 |

| т. | On the size of Leville a Westership and | C = N | |
|-------|---|----------|--|
| In re | Catherine Louise Kutschinski | Case No. | |
| _ | | Debtor | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGEN | QUIDA | P U T E | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--|------------------------|--|-----------|-------------|------------------|--|---------------------------------|
| Account No. xxxxxxxxx5788 | | | 06/19/03 | Ť | T E D | | | |
| WELLS FARGO HOME MORTGAGE 7255 BAYMEADOWS WAY DES MOINES, IA 50306 | | - | FIRST MORTGAGE RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 | | D | | 70 500 00 | 0.00 |
| Account No. xxxxxxxxx5788 | | | Value \$ 99,000.00 | | \vdash | H | 79,599.00 | 0.00 |
| WELLS FARGO HOME MORTGAGE C/O TROTT & TROTT 31440 NORTHWESTERN HWY SUITE 200 | | | Representing: WELLS FARGO HOME MORTGAGE | | | | Notice Only | |
| FARMINGTON, MI 48334 | | | Value \$ | 1 | | | | |
| Account No. | | | Value \$ | | | | | |
| | | | Value \$ | + | | | | |
| Account No. | | | | | | | | |
| | <u>. </u> | <u>L</u> | Value \$ | Sub | tota | | | |
| Sheet 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims Subtotal (Total of this page) | | | | | - 1 | 79,599.00 | 0.00 | |
| Tota (Report on Summary of Schedule | | | | | | | 139,318.00 | 25,668.00 |

B6E (Official Form 6E) (4/10)

| • | | | |
|-------|------------------------------|----------|--|
| In re | Catherine Louise Kutschinski | Case No. | |
| - | | Debtor | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

| priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| |

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|--------|----------|--|
| | | Debtor | -7 | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| • | | | * | | | | | |
|--|----------|-------|--|------------------|------------------|---|------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J | | N T I N | I | S | S P U T | AMOUNT OF CLAIM |
| Account No. x-xxxxx/xxxxxxxxxxxxx7143 AMERICAN EXPRESS AMEX SPECIAL RESEARCH PO BOX 981540 EL PASO, TX 79998 | | - | 12/01/06 CREDIT CARD CASE NO. 12-1560-GC | 7 T | A T E D | | | 4,291.00 |
| Account No. x-xxxxx/xxxxxxxxxxxxx7143 AMERICAN EXPRESS PO BOX 297871 FORT LAUDERDALE, FL 33329 | | | Representing: AMERICAN EXPRESS | | | | | Notice Only |
| Account No. x-xxxxx/xxxxxxxxxxxxx7143 AMERICAN EXPRESS C/O SHERMETA, ADAMS & VON ALLM PO BOX 5016 ROCHESTER, MI 48308 | | | Representing: AMERICAN EXPRESS | | | | | Notice Only |
| Account No. xxxx xx. xx-xx-1560 AMERICAN EXPRESS % 61ST DISTRICT COURT 180 OTTAWA NW STE 1400 GRAND RAPIDS, MI 49503 | | | Representing: AMERICAN EXPRESS | | | | | Notice Only |
| _4 _ continuation sheets attached | | | (Total of t | Subt | | | ;) | 4,291.00 |

| In re | Catherine Louise Kutschinski | Case No | |
|-------|------------------------------|---------|--|
| | | Debtor | |

| _ | Τc | Lu | ahand Mila laint or Community | 10 | Lu | Τ. | 1 |
|--|----------|------------------|---|--------|------------------|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | LIGUID | I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | | 06/01/11 | Т | A T E D | | |
| CARE CREDIT / GE MONEY BANK C/O CACH LLC/SQUARE TWO FINANC 4340 SOUTH MONACO STREET 2ND FLOOR DENVER, CO 80237 | | - | COLLECTIONS CREDIT CARD | | | | 3,600.00 |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | | | | | | |
| CARE CREDIT / GE MONEY BANK C/O CACH LLC/SQUARE TWO FINANC 4340 S MONACO ST UNIT 2 DENVER, CO 80237 | | | Representing: CARE CREDIT / GE MONEY BANK | | | | Notice Only |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | T | T | | | T | T | |
| CARE CREDIT / GE MONEY BANK C/O NEUHEISEL LAW FIRM PC 1501 W FOUNTAINHEAD PKWY SUITE 130 TEMPE, AZ 85282 | | | Representing: CARE CREDIT / GE MONEY BANK | | | | Notice Only |
| Account No. xxxx-xxxx-xxxx-0111 | T | T | 02/01/05 | | T | T | |
| CHASE P.O. BOX 15298 WILMINGTON, DE 19850 | | - | CREDIT CARD | | | | 9,364.00 |
| Account No. xxxxxxxxxxxx0111 | ╁ | \vdash | | + | + | + | ., |
| CHASE C/O FREDERICK J HANNA & ASSOC 1427 ROSWELL ROAD MARIETTA, GA 30062 | | | Representing: CHASE | | | | Notice Only |
| Sheet no1 of _4 sheets attached to Schedule of | | | - | Sub | | | 12,964.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total o | f this | pa | ge) | 1 =,5550 |

| In re | Catherine Louise Kutschinski | Case No | |
|-------|------------------------------|---------|--|
| - | | Debtor | |

| ODEDITODIS MANG | C | Hu | sband, Wife, Joint, or Community | | СО | U | D | |
|---|---------------|-------------|---|---------------|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | O D E B T O R | J H M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIN IS SUBJECT TO SETOFF, SO STATE. | πl | N G | UNLLQULDATE | DISPUTED | AMOUNT OF CLAIM |
| Account No. xxxxxx5988 | | | 11/01/09 | | Ť | T E | İ | |
| CONSUMERS CREDIT UNION 7040 STADIUM DRIVE KALAMAZOO, MI 49009 | | - | POSSIBLE AUTO LOAN DEFICIENCY | | | D | | 525.00 |
| Account No. xx4179 | ╁ | | 2007 | | | | | 020.00 |
| ERIE CONSTRUCTION C/O HOME IMPROVEMENT ACCEPTANC PO BOX 2698 TOLEDO, OH 43606 | | - | COLLECTIONS | | | | | 1,978.00 |
| Account No. xxxxxxxxxxx0098 | ╁ | | 09/01/05 | | | | | |
| HOME DEPOT C/O CITIBANK USA PO BOX 20363 KANSAS CITY, MO 64195 | | - | CREDIT CARD | | | | | 1,328.00 |
| Account No. xxxxxxxxxxx0098 | ✝ | | | | | | | |
| HOME DEPOT C/O CITIBANK USA PO BOX 6497 SIOUX FALLS, SD 57117 | | | Representing: HOME DEPOT | | | | | Notice Only |
| Account No. xxxxxxxxxxx0098 | T | \vdash | | | \exists | \dashv | | |
| HOME DEPOT C/O THE CBE GROUP INC 1309 TECHNOLOGY PKWY CEDAR FALLS, IA 50613 | | | Representing: HOME DEPOT | | | | | Notice Only |
| Sheet no. 2 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Tota | Sı l of th | | otal oag | - 1 | 3,831.00 |

| In re | Catherine Louise Kutschinski | Case No | |
|-------|------------------------------|---------|--|
| | | Debtor | |

| | С | Hu | sband, Wife, Joint, or Community | 10 | : Tı | J I | σТ | |
|---|----------|-------|---|-----------------------|-----------|-----------|----|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | 7 7 1 1 1 | | | | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx0098 | | | | ٦ | . . | D I | Ī | |
| HOME DEPOT C/O CBE GROUP INC PO BOX 2965 WATERLOO, IA 50704 | | | Representing: HOME DEPOT | | | | | Notice Only |
| Account No. xxxxxxxxxxxx1338 | t | | 11/01/05 | | t | + | | |
| HSBC / BEST BUY PO BOX 5253 CAROL STREAM, IL 60197 | | - | CREDIT CARD | | | | | |
| | ┖ | | | _ | 1 | 1 | | 2,247.00 |
| Account No. xxxxxxxxxxxx1338 HSBC / BEST BUY % UNITED RECOVERY SYSTEMS 5800 NORTH COURSE DRIVE HOUSTON, TX 77072 | | | Representing: HSBC / BEST BUY | | | | | Notice Only |
| Account No. xxxx-xxxx-7269 | t | | 01/01/12 | | \dagger | \dagger | 1 | |
| INDEPENDENT BANK U.S. BANK NATIONAL ASSOCIATION C/O PORTFOLIO RECOVERY PO BOX 41067 NORFOLK, VA 23541 | | - | CREDIT CARD | | | | | 4,112.00 |
| Account No. xxxxxxxxxxx7269 | 1 | T | | | T | T | | |
| INDEPENDENT BANK U.S. BANK NATIONAL ASSOCIATION C/O PORTFOLIO RECOVERY 120 CORPORATE BLVD STE 1 NORFOLK, VA 23502 | | | Representing: INDEPENDENT BANK | | | | | Notice Only |
| Sheet no. 3 of 4 sheets attached to Schedule of | | _ | ı | Su | oto | tal | 1 | 6,359.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total | of this | s pa | age |) | 0,309.00 |

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|--------|----------|--|
| | | Debtor | | |

| | | | | | _ | _ | Т |
|---|----------|-------------|---|-------------|--------------|----------|-----------------|
| CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | - 6 | U N | D | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | | DISPUTED | AMOUNT OF CLAIM |
| Account No. xxxx-xxxx-xxxx-1293 | | | 03/01/02 | T | T | | |
| OPTION 1 CREDIT UNION 630 32ND AVE GRAND RAPIDS, MI 49548 | | _ | CREDIT CARD | | D | | 8,091.00 |
| Account No. xxxxxxx0003 | I | | 06/01/09 | \top | T | | |
| OPTION 1 CREDIT UNION 630 32ND ST SE GRAND RAPIDS, MI 49548 | | _ | PERSONAL LOAN | | | | |
| | | | | | | | 2,561.00 |
| Account No. xxxxxxx0001 OPTION 1 CREDIT UNION 630 32ND ST SE GRAND RAPIDS, MI 49548 | | - | 06/01/92 CREDIT CARD | | | | |
| GRAND RAFIDS, IVII 45340 | | | | | | | 75.00 |
| Account No. xxxxxx-x0011 OPTION 1 CREDIT UNION 630 32ND STREET SE GRAND RAPIDS, MI 49548 | | - | 05/2012 OVERDRAFT | | | | 00.05 |
| Account No. | | | | + | | | 66.95 |
| | | | | | | | |
| Sheet no4 of _4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | - | · | (Total of | Sub this | | | 10,793.95 |
| | | | (Report on Summary of S | | Γota dule | | 38,238.95 |

Case:12-04765-swd Doc #:1 Filed: 05/17/12 Page 25 of 52

B6G (Official Form 6G) (12/07)

| · | | | |
|-------|------------------------------|----------|--|
| In re | Catherine Louise Kutschinski | Case No. | |
| | | Debtor | |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case:12-04765-swd Doc #:1 Filed: 05/17/12 Page 26 of 52

_____, Case No. _____

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

Catherine Louise Kutschinski

B6H (Official Form 6H) (12/07)

In re

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

| B6I (Off | icial Form 6I) (12/07) | | | |
|----------|------------------------------|-----------|----------|--|
| In re | Catherine Louise Kutschinski | | Case No. | |
| | | Debtor(s) | | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| | DEDENDENTE | OF DEDECT AND GE | OHEE | | |
|---|--|------------------|----------|---------|--------|
| Debtor's Marital Status: | | OF DEBTOR AND SE | OUSE | | |
| Single | RELATIONSHIP(S): BOYFRIEND | AGE(S): 41 | | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | NURSE | | | | |
| Name of Employer | SPECTRUM HEALTH | | | | |
| How long employed | 18 YEARS | | | | |
| Address of Employer | 100 MICHIGAN STREET NE GRAND RAPIDS, MI 49503 | | | | |
| INCOME: (Estimate of average | or projected monthly income at time case filed) | | DEBTOR | | SPOUSE |
| | and commissions (Prorate if not paid monthly) | \$ | 5,489.00 | \$ | N/A |
| 2. Estimate monthly overtime | | \$ | 0.00 | \$ | N/A |
| 3. SUBTOTAL | | \$ | 5,489.00 | \$ | N/A |
| 4. LESS PAYROLL DEDUCTIO | ONS | | | | |
| a. Payroll taxes and social s | ecurity | \$ | 1,497.00 | \$ | N/A |
| b. Insurance | | \$ | 137.00 | \$ | N/A |
| c. Union dues | | \$ | 0.00 | \$ | N/A |
| · 1 3/ | O1(k) LOAN | | 88.00 | \$ | N/A |
| <u>C</u> | AFETERIA | | 117.00 | \$ | N/A |
| 5. SUBTOTAL OF PAYROLL I | DEDUCTIONS | \$_ | 1,839.00 | \$ | N/A |
| 6. TOTAL NET MONTHLY TA | KE HOME PAY | \$ | 3,650.00 | \$ | N/A |
| | n of business or profession or farm (Attach detailed state | ement) \$_ | 0.00 | \$ | N/A |
| 8. Income from real property | | \$ | 0.00 | \$ | N/A |
| Interest and dividends | | \$ | 0.00 | \$ | N/A |
| dependents listed above | port payments payable to the debtor for the debtor's use | or that of \$ | 0.00 | \$ | N/A |
| 11. Social security or governmen | t assistance | | | | |
| (Specify): | | \$ | 0.00 | \$ | N/A |
| 10 D | | | 0.00 | \$ | N/A |
| 12. Pension or retirement income13. Other monthly income | ; | \$ _ | 0.00 | \$ | N/A |
| (Specify): | | • | 0.00 | \$ | N/A |
| (Specify). | | \$ | 0.00 | \$ | N/A |
| 14. SUBTOTAL OF LINES 7 TH | HROUGH 13 | \$ | 0.00 | \$ | N/A |
| 15. AVERAGE MONTHLY INC | COME (Add amounts shown on lines 6 and 14) | \$ | 3,650.00 | \$ | N/A |
| | | <u> </u> | <u> </u> | 3,650.0 | n |
| 10. COMBINED AVERAGE MO | ONTHLY INCOME: (Combine column totals from line | 15) | \$ | 5,050.0 | |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| B6J (Off | cial Form 6J) (12/07) | | | |
|----------|------------------------------|-----------|----------|--|
| In re | Catherine Louise Kutschinski | | Case No. | |
| | | Debtor(s) | | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 | 2C. | Z , |
|--|----------------|---------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separat | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 0.00 |
| a. Are real estate taxes included? Yes No _X | | |
| a. Are real estate taxes included? Yes No X b. Is property insurance included? Yes No X | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 170.00 |
| b. Water and sewer | \$ | 50.00 |
| c. Telephone | \$ | 0.00 |
| d. Other See Detailed Expense Attachment | \$ | 328.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 80.00 |
| 4. Food | \$ | 430.00 |
| 5. Clothing | \$ | 20.00 |
| 6. Laundry and dry cleaning | 5 | 0.00 40.00 |
| 7. Medical and dental expenses 8. Transportation (not including our payments) | φ ——— | 265.00 |
| 8. Transportation (not including car payments)9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ \$ | 0.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | Ψ | 0.00 |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 98.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | · - | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other EDUCATION TO MAINTAIN EMPLOYMENT | \$ | 10.00 |
| Other | \$ | 0.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 1,491.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:20. STATEMENT OF MONTHLY NET INCOME | - | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 3,650.00 |
| b. Average monthly expenses from Line 18 above | \$ | 1,491.00 |
| c. Monthly net income (a. minus b.) | \$ | 2,159.00 |

Case:12-04765-swd Doc #:1 Filed: 05/17/12 Page 29 of 52

| B6J (Official Form 6J) (12/07) | | | |
|------------------------------------|--------------------|--------------------|--------|
| In re Catherine Louise Kutschinski | | Case No. | |
| | Debtor(s) | | |
| SCHEDULE J - CURRENT EXPE | ENDITURES OF INC | DIVIDUAL DEBTOR(S) | |
| Detailed 1 | Expense Attachment | | |
| Other Utility Expenditures: | | | |
| CELLULAR TELEPHONE | | \$ | 100.00 |
| TELEVISION | | <u> </u> | 150.00 |

INTERNET

Total Other Utility Expenditures

78.00

328.00

Case:12-04765-swd Doc #:1 Filed: 05/17/12 Page 30 of 52

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Western District of Michigan

| In re | Catherine Louise Kutschinski | | Case No. | | | | |
|-------|---|--------------|-----------------------------------|------------|----|--|--|
| | | | Debtor(s) | Chapter | 13 | | |
| | | | | | | | |
| | | | | | | | |
| | DECLARATION CONCERNING DEBTOR'S SCHEDULES | | | | | | |
| | | | | | | | |
| | DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <u>23</u> sheets, and that they are true and correct to the best of my knowledge, information, and belief. | | | | | | |
| | sheets, and that they are true and correct to the | e best of my | knowledge, information, | and ocher. | | | |
| | | | | | | | |
| | | | | | | | |
| Date | May 17, 2012 | Signature | /s/ Catherine Louise Kuts | | | | |
| | | | Catherine Louise Kutsch | inski | | | |
| | | | Debtor | | | | |
| | | | Catherine Louise Kutsch Debtor | inski | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Western District of Michigan

| In re | Catherine Louise Kutschinski | | Case No. | |
|-------|------------------------------|-----------|----------|----|
| | | Debtor(s) | Chapter | 13 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$25,840.00 2012 WAGES (YTD)

\$60,568.00 2011 WAGES \$55,249.00 2010 WAGES

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS | DATES OF | | AMOUNT STILL |
|---------------------------|----------|-------------|--------------|
| OF CREDITOR | PAYMENTS | AMOUNT PAID | OWING |
| REGIONAL FINANCE CORP | MONTHLY | \$457.00 | \$16,889.00 |
| 2676 E AURORA RD | | | |
| TWINSBURG, OH 44087 | | | |
| WELLS FARGO HOME MORTGAGE | 02/2012 | \$1,500.00 | \$79,599.00 |
| 7255 BAYMEADOWS WAy | | | |
| DES MOINES, IA 50306 | | | |

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | AMOUNI | |
|------------------------------|-----------|-----------|--------------|
| | DATES OF | PAID OR | |
| | PAYMENTS/ | VALUE OF | AMOUNT STILL |
| NAME AND ADDRESS OF CREDITOR | TRANSFERS | TRANSFERS | OWING |

None

c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

ANGUNE

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER AMERICAN EXPRESS CENTURION BANK v CATHERINE KUTSCHINSKI CASE NO. 12-GC-1560 NATURE OF PROCEEDING CONTRACT

COURT OR AGENCY AND LOCATION 61ST DISTRICT COURT 180 OTTAWA AVENUE NW STE 1400 GRAND RAPIDS, MI 49503 STATUS OR DISPOSITION PENDING

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

Mona

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE GREENPATH DEBT SOLUTIONS 1241 E BELTLINE AVENUE GRAND RAPIDS, MI 49525 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 04/23/2012 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$100.00

NAME AND ADDRESS OF PAYEE MARTIN L ROGALSKI PC 1881 GEORGETOWN CENTER DRIVE JENISON, MI 49428 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 04/27/2012 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$2,219.00 FEES
\$ 281.00 COSTS

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

5

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DOCKET NUMBER

STATUS OR DISPOSITION

18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | May 17, 2012 | Signature | /s/ Catherine Louise Kutschinski |
|------|--------------|-----------|----------------------------------|
| | | | Catherine Louise Kutschinski |
| | | | Debtor |

 $Penalty\ for\ making\ a\ false\ statement:\ Fine\ of\ up\ to\ \$500,000\ or\ imprisonment\ for\ up\ to\ 5\ years,\ or\ both.\ 18\ U.S.C.\ \S\$\ 152\ and\ 3571$

7

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MICHIGAN

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$46 administrative fee: Total fee \$1046)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

Case No. (if known)

United States Bankruptcy Court

| | Western Distr | ict | of Michigan | | | | | |
|---------|---|------|--------------------------------|----|--------------|--|--|--|
| In re | Catherine Louise Kutschinski | | Case No. | | | | | |
| | I | Debt | or(s) Chapter | 13 | | | | |
| G 1 | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE Certification of Debtor I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy | | | | | | | |
| Code. | | | | | | | | |
| Cather | ine Louise Kutschinski | X | /s/ Catherine Louise Kutschins | ki | May 17, 2012 | | | |
| Printed | Name(s) of Debtor(s) | | Signature of Debtor | | Date | | | |

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Western District of Michigan

| n re Ca | atherine Louise Kutschinski | | Case No. | |
|----------|---------------------------------------|---|---------------------|-----------------------|
| <u> </u> | | Debtor(s) | Chapter | 13 |
| | VEDIEV | | | |
| | VERIF10 | CATION OF CREDITOR | R MATRIX | |
| above- | named Debtor hereby verifies that the | he attached list of creditors is true and | correct to the best | of his/her knowledge. |
| ate: Ma | ay 17, 2012 | /s/ Catherine Louise Kutschins | ski | |
| | | Catherine Louise Kutschinski | | |

Signature of Debtor

AMERICAN EXPRESS AMEX SPECIAL RESEARCH PO BOX 981540 EL PASO TX 79998

AMERICAN EXPRESS PO BOX 297871 FORT LAUDERDALE FL 33329

AMERICAN EXPRESS C/O SHERMETA, ADAMS & VON ALLM PO BOX 5016 ROCHESTER MI 48308

AMERICAN EXPRESS % 61ST DISTRICT COURT 180 OTTAWA NW STE 1400 GRAND RAPIDS MI 49503

CARE CREDIT / GE MONEY BANK
C/O CACH LLC/SQUARE TWO FINANC
4340 SOUTH MONACO STREET
2ND FLOOR
DENVER CO 80237

CARE CREDIT / GE MONEY BANK C/O CACH LLC/SQUARE TWO FINANC 4340 S MONACO ST UNIT 2 DENVER CO 80237

CARE CREDIT / GE MONEY BANK C/O NEUHEISEL LAW FIRM PC 1501 W FOUNTAINHEAD PKWY SUITE 130 TEMPE AZ 85282

CHASE PO BOX 901039 FORT WORTH TX 76101

CHASE P.O. BOX 15298 WILMINGTON DE 19850

CHASE C/O GC SERVICES LP 6330 GULFTON HOUSTON TX 77081

CHASE C/O FREDERICK J HANNA & ASSOC 1427 ROSWELL ROAD MARIETTA GA 30062 CONSUMERS CREDIT UNION 7040 STADIUM DRIVE KALAMAZOO MI 49009

ERIE CONSTRUCTION C/O HOME IMPROVEMENT ACCEPTANC PO BOX 2698 TOLEDO OH 43606

HOME DEPOT C/O CITIBANK USA PO BOX 20363 KANSAS CITY MO 64195

HOME DEPOT C/O CITIBANK USA PO BOX 6497 SIOUX FALLS SD 57117

HOME DEPOT C/O THE CBE GROUP INC 1309 TECHNOLOGY PKWY CEDAR FALLS IA 50613

HOME DEPOT C/O CBE GROUP INC PO BOX 2965 WATERLOO IA 50704

HSBC / BEST BUY PO BOX 5253 CAROL STREAM IL 60197

HSBC / BEST BUY % UNITED RECOVERY SYSTEMS 5800 NORTH COURSE DRIVE HOUSTON TX 77072

INDEPENDENT BANK
U.S. BANK NATIONAL ASSOCIATION
C/O PORTFOLIO RECOVERY
PO BOX 41067
NORFOLK VA 23541

INDEPENDENT BANK
U.S. BANK NATIONAL ASSOCIATION
C/O PORTFOLIO RECOVERY
120 CORPORATE BLVD STE 1
NORFOLK VA 23502

OPTION 1 CREDIT UNION 630 32ND AVE GRAND RAPIDS MI 49548

OPTION 1 CREDIT UNION 630 32ND ST SE GRAND RAPIDS MI 49548

OPTION 1 CREDIT UNION 630 32ND STREET SE GRAND RAPIDS MI 49548

REGIONAL FINANCE CORP 2676 E AURORA RD TWINSBURG OH 44087

REGIONAL FINANCE CORP C/O REGIONAL ACCEPTANCE CORP PO BOX 830913 BIRMINGHAM AL 35283

WELLS FARGO HOME MORTGAGE 7255 BAYMEADOWS WAY DES MOINES IA 50306

WELLS FARGO HOME MORTGAGE C/O TROTT & TROTT 31440 NORTHWESTERN HWY SUITE 200 FARMINGTON MI 48334

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B22C (Official Form 22C) (Chapter 13) (12/10)

In re Catherine Louise Kutschinski
Debtor(s)

Case Number:

(If known)

(If known)

Disposable income is determined under § 1325(b)(3).

Disposable income is not determined under § 1325(b)(3).

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

(Check the boxes as directed in Lines 17 and 23 of this statement.)

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | Part I, REPORT OF INCOME | | | |
|---|---|--------|-----------------|----------|
| | Marital/filing status. Check the box that applies and complete the balance of this part of this state | ment | t as directed. | |
| 1 | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. | | | |
| | b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") | ne'') | for Lines 2-10. | |
| | All figures must reflect average monthly income received from all sources, derived during the six | | Column A | Column B |
| | calendar months prior to filing the bankruptcy case, ending on the last day of the month before | | Debtor's | Spouse's |
| | the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. | Income | | Income |
| 2 | Gross wages, salary, tips, bonuses, overtime, commissions. | \$ | 5,430.50 | \$ |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. | | | |
| | Debtor Spouse | | | |
| | a. Gross receipts \$ 0.00 \$ | | | |
| | b. Ordinary and necessary business expenses \$ 0.00 \$ | | 0.00 | Ф |
| | c. Business income Subtract Line b from Line a | \$ | 0.00 | \$ |
| 4 | Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse a. Gross receipts \$ 0.00 \$ | | | |
| | b. Ordinary and necessary operating expenses \$ 0.00 \$ c. Rent and other real property income Subtract Line b from Line a | \$ | 0.00 | \$ |
| 5 | Interest, dividends, and royalties. | \$ | | \$ |
| 6 | Pension and retirement income. | \$ | | \$ |
| | Any amounts paid by another person or entity, on a regular basis, for the household | Ψ | 0.00 | y . |
| 7 | expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. | | | \$ |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ | \$ | 0.00 | \$ |

| 9 | Income from all other sources. Specify source and on a separate page. Total and enter on Line 9. Do n maintenance payments paid by your spouse, but it separate maintenance. Do not include any benefits payments received as a victim of a war crime, crime international or domestic terrorism. | ot include alimony nclude all other pay s received under the | or separate yments of alimony or Social Security Act or | | | |
|----|--|--|---|-----------|------|-----------|
| | international of domestic terrorism. | Debtor | Spouse | | | |
| | a. \$ b. \$ | | \$ | \$ 0.0 | 0 \$ | |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, and, if C | 'olumn R is complet | Ψ | \$ 0.0 | U \$ | |
| 10 | in Column B. Enter the total(s). \$ 5,430 | | | | | |
| 11 | Total. If Column B has been completed, add Line 10 the total. If Column B has not been completed, ente | | | \$ | | 5,430.50 |
| | Part II. CALCULATION | OF § 1325(b)(4 |) COMMITMENT I | PERIOD | | |
| 12 | Enter the amount from Line 11 | | | | \$ | 5,430.50 |
| 13 | on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. | | | | | |
| | c. Total and enter on Line 13 | \$ | | | \$ | 0.00 |
| 14 | Subtract Line 13 from Line 12 and enter the result | lt. | | | \$ | 5,430.50 |
| 15 | Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result. | | | | | 65,166.00 |
| 16 | Applicable median family income. Enter the media information is available by family size at www.usdoj | | | | | |
| | a. Enter debtor's state of residence: MI | b. Enter del | otor's household size: | 2 | \$ | 51,660.00 |
| 17 | Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment at the top of page 1 of this statement and continue with this statement. | | | | | |
| | Part III. APPLICATION OF § 132 | 25(b)(3) FOR DETI | ERMINING DISPOSABI | LE INCOME | | |
| 18 | Enter the amount from Line 11. | | | | \$ | 5,430.50 |
| 19 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. | | | | | |
| | Total and enter on Line 19. | | | | \$ | 0.00 |
| 20 | Current monthly income for § 1325(b)(3). Subtract | t Line 19 from Line | 18 and enter the result. | | \$ | 5,430.50 |

| | 1 | | | | | | | |
|--|------------------|---|--------------------------|--------|--|--|--------|-----------|
| 21 | | lized current monthly income result. | ome for § 1325(b)(3). N | Aultip | oly the amount from Line 2 | 0 by the number 12 and | \$ | 65,166.00 |
| 22 | Applic | Applicable median family income. Enter the amount from Line 16. | | | | | \$ | 51,660.00 |
| | Applic | ation of § 1325(b)(3). Che | ck the applicable box an | d pro | ceed as directed. | | | |
| 23 | | e amount on Line 21 is mo 25(b)(3)" at the top of page | | | | | ined u | nder § |
| ☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part VII of this statement. | | | | | | | | |
| | | Part IV. Ca | ALCULATION (|)F I | DEDUCTIONS FR | OM INCOME | | |
| | | Subpart A: D | eductions under Star | ıdar | ds of the Internal Reve | nue Service (IRS) | | |
| National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | | Expenses for the om the clerk of the e allowed as exemptions ou support. | \$ | 1,029.00 |
| National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. | | | | | | | | |
| | Perso | ns under 65 years of age | | Pers | ons 65 years of age or old | ler | | |
| İ | a1. | Allowance per person | 60 | a2. | Allowance per person | 144 | | |
| | b1. | Number of persons | 2 | b2. | Number of persons | 0 | | |
| | c1. | Subtotal | 120.00 | c2. | Subtotal | 0.00 | \$ | 120.00 |
| Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | nis information is e family size consists of | \$ | 480.00 | |
| Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. | | | | | | | | |
| | | IRS Housing and Utilities | | | | 1,074.00 | | |
| | | Average Monthly Payment home, if any, as stated in L | ine 47 | y you | \$ | 798.49 | | |
| | | Net mortgage/rental expen | | | Subtract Line b fr | | \$ | 275.51 |
| 26 | 25B do Standa | Standards: housing and upperson accurately compute rds, enter any additional antion in the space below: | the allowance to which | you a | re entitled under the IRS H | lousing and Utilities | | |
| | Conten | non in the space below. | | | | | \$ | 0.00 |

| | Local Standards: transportation; vehicle operation/public transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation. | | | | |
|------|---|--|----|----------|----------|
| 27.4 | Check the number of vehicles for which you pay the operating expens | | | | |
| 27A | included as a contribution to your household expenses in Line 7. \square (| | | | |
| | If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ | e "Operating Costs" amount from IRS Loca e applicable Metropolitan Statistical Area o | r | \$ | 212.00 |
| 27B | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction fo your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | \$ | 0.00 |
| | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) ■ 1 □ 2 or more. | | | | |
| 28 | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. | | | | |
| | a. IRS Transportation Standards, Ownership Costs | \$ 517. | 00 | | |
| | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 | \$ 457. | 00 | | |
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | | \$ | 60.00 |
| 29 | the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. | court); enter in Line b the total of the Aver- | | | |
| | a. IRS Transportation Standards, Ownership Costs | \$ 0. | 00 | | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 | \$ 0. | 00 | | |
| | c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | | \$ | 0.00 |
| 30 | Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale | come taxes, self employment taxes, social | | \$ | 1,497.00 |
| 31 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | | 0.00 |
| 32 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | | \$ | 0.00 |
| 33 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not | | | \$ | |
| 34 | include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | 10.00 |
| 35 | Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do | | | \$ \$ | 0.00 |
| | childrane - such as baby-straing, day care, harsery and presented. Do not include other educational payments. | | | | |

| 36 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. | \$ | 0.00 |
|----|---|----|----------|
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | \$ | 0.00 |
| 38 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. | | 3,683.51 |
| | Subpart B: Additional Living Expense Deductions | | |
| | Note: Do not include any expenses that you have listed in Lines 24-37 | | |
| | Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. | | |
| 39 | a. Health Insurance \$ 137.00 | | |
| | b. Disability Insurance \$ 0.00 | | |
| | c. Health Savings Account \$ 0.00 | | |
| | Total and enter on Line 39 | \$ | 137.00 |
| | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: | | |
| | <u>\$</u> | | |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. | \$ | 0.00 |
| 41 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | \$ | 0.00 |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National | | |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. | \$ | 0.00 |
| 46 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45. | \$ | 137.00 |

| | | | | Subpart C: Deductions for D | ebt l | Payment | | | |
|----|------------------|-----------------------------|---|---|-------------------------|--|--|----|----------|
| 47 | o c s c | wn, hecl chec ase, | list the name of creditor, ident k whether the payment include duled as contractually due to ea | ns. For each of your debts that is secured if your debts that is secured if you have a constructed in the secured Creditor in the 60 months fact additional entries on a separate page. | the A hly P ollow | Average Monthly ayment is the to ving the filing of | Payment, and tal of all amounts the bankruptcy | 7 | |
| | | | Name of Creditor | Property Securing the Debt | | Average Monthly Payment | Does payment include taxes or insurance | | |
| | | a. | CHASE | RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 | \$ | | ■yes □no | | |
| | | b. | REGIONAL FINANCE CORP | 2008 TOYOTA CAMRY | \$ | 457.00 | □yes ■no | | |
| | | c. | WELLS FARGO HOME MORTGAGE | RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 | \$ | 598.49 | ■yes □no | | |
| | | | | | Т | otal: Add Lines | | \$ | 1,255.49 |
| 48 | p | ayn ums | nents listed in Line 47, in order in default that must be paid in ollowing chart. If necessary, lis | nt (the "cure amount") that you must part to maintain possession of the property. order to avoid repossession or foreclos additional entries on a separate page. | The | cure amount wo List and total any | uld include any such amounts in | | |
| | | a. | Name of Creditor CHASE | Property Securing the Debt RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 | | 1/60th of t | the Cure Amount 33.33 | | |
| | | b. | WELLS FARGO HOME MORTGAGE | RESIDENCE LOCATED AT: 1821 PHILADELPHIA AVE SE GRAND RAPIDS, MI 49507 | | \$ | 100.00 Total: Add Lines | \$ | 133.33 |
| 49 | p | rior | ity tax, child support and alimo | claims. Enter the total amount, divided ony claims, for which you were liable at uch as those set out in Line 33. | | 0, of all priority | claims, such as | | 0.00 |
| | | | pter 13 administrative expense ting administrative expense. | ses. Multiply the amount in Line a by the | e amo | ount in Line b, a | nd enter the | | |
| | | a. | Projected average monthly | | \$ | | 2,159.00 | | |
| 50 | | b. | issued by the Executive Of information is available at the bankruptcy court.) | district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of | X | | 6.60 | | |
| | ľ | c. | Average monthly administr | rative expense of chapter 13 case | To | otal: Multiply Li | nes a and b | \$ | 142.49 |
| 51 | r | Cota | l Deductions for Debt Payme | nt. Enter the total of Lines 47 through : | 50. | | | \$ | 1,531.31 |
| | | | | Subpart D: Total Deductions | fron | n Income | | | |
| 52 | T | ota | l of all deductions from incon | ne. Enter the total of Lines 38, 46, and | 51. | | | \$ | 5,351.82 |
| | | | Part V. DETERM | INATION OF DISPOSABLE | INC | COME UNDI | ER § 1325(b)(2 | 2) | |
| 53 | T | ota | l current monthly income. E | nter the amount from Line 20. | | | | \$ | 5,430.50 |
| 54 | p | ayn | nents for a dependent child, rep | y average of any child support payment ported in Part I, that you received in account of the part I. | | | | | 0.00 |
| | 16 | uw, | to the extent reasonably necess | sary to be expended for such clinic. | | | | \$ | 0.00 |

| Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayment loans from retirement plans, as specified in § 362(b)(19). | | | | | 88.00 | |
|---|--|-------------|----------------|----|----------|--|
| 56 | Total of all deductions allowed under § 707(b)(2). Enter the amount | from Line 5 | 2. | \$ | 5,351.82 | |
| Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable. Nature of special circumstances. | | | | | | |
| 57 | Nature of special circumstances | Amo | unt of Expense | | | |
| | a. | \$ | | ! | | |
| | b. | \$ | | | | |
| | c. | \$ | | | | |
| | | Total | : Add Lines | \$ | 0.00 | |
| 58 | \$ | 5,439.82 | | | | |
| Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result. | | | | \$ | -9.32 | |
| | Part VI. ADDITIONAL EX | PENSE C | LAIMS | | | |
| Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. 60 Expense Description | | | | | | |
| | Part VII. VERIFIC | | | | | |
| 61 | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.) | | | | | |

(Debtor)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2011 to 04/30/2012.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: WAGES

Income by Month:

| 11/2011 | \$4,841.00 |
|--------------------|---|
| 12/2011 | \$4,398.00 |
| 01/2012 | \$4,349.00 |
| 02/2012 | \$5,392.00 |
| 03/2012 | \$8,063.00 |
| 04/2012 | \$5,540.00 |
| Average per month: | \$5,430.50 |
| | 12/2011 01/2012 02/2012 03/2012 04/2012 |